In February 2020, Bulamu’s medical camp in Budaka District treated 17,206 patients in one week. Thanks to our partnerships with local governments and mobilization of existing local resources, the “True Value” of medical services provided at the camp totaled $29.90, or 5.9 times our cost of $5.10 per patient. This leverages every donor’s gift to improve the lives of people in need.

Then in March, Uganda issued a nationwide COVID-19 lockdown. For 3 months, public transportation shut down and people were confined to their homes. While medical camps were no longer possible during the pandemic, the shutdown had increased the need for healthcare, with many patients going untreated – and some dying – due to the lockdown’s collateral damage.

In early June, when travel was again permitted, we launched the Bulamu Clinical Support Team (CST) Program, building on our “Core Team” of licensed Ugandan medical professionals with flexible schedules and a desire to serve wherever needed. Instead of the patients coming to us, however, we would go to them. We now send 7-8 person teams of clinicians to stay onsite and support the existing staffs at high-volume public hospitals and health centers for four weeks at a time. Through this approach, Bulamu’s Clinical Support Teams treat patients directly and while also improving the public health system through management innovations.

CST PROGRAM SERVICES INCLUDE

1. COVID-19 Training & PPE – Our Core Team of certified COVID-19 trainers train local staff members and provide needed personal protective equipment (PPE) not otherwise available.

2. Diagnostic Equipment – As with our Health Center Excellence (HCE) Program, we supply medical devices to take vital signs (stethoscopes, blood pressure monitors, SpO2 monitors, glucometers, etc.) and instruct local hospital staffs on their proper use.

3. Patient Forms & Systemic Data – Another key HCE element is the introduction of multi-part patient treatment forms, with a copy for the patient to take with them. This data allows us to
track patient diagnoses, treatments, and prescriptions and share a weekly dashboard of key performance indicators (KPIs) with our partner hospitals and District governments.

4. Medicines & Supplies – To avoid shortages, each CST brings its own inventory of essential medicines and supplies, including such basics as antibiotics, surgical gloves, and sutures.

5. Transportation – We hire ambulances to transport emergency cases needing immediate referral to higher-level hospitals.

6. Maternal & Child Health (MCH) – With the recent travel restrictions, maternity care is the clinical area that has suffered the most. Every Bulamu team includes midwives and nurses with the training, supplies, and equipment necessary to support patients with complications.

7. Surgery Intensive (SI) – The last four days of each CST cycle is set aside for a “Surgery Intensive.” At each SI, our team of Ugandan surgeons, anesthesiologists, and nurses perform surgeries in well-equipped operating rooms, following the formula of our Supercamps.

After reviewing the Bulamu CST program, the leadership of Wakiso District partnered with Bulamu through a Memorandum of Understanding. We launched the program on June 15 at four community hospitals, each treating 300-600 patients a week. The largest district in Uganda, Wakiso has a population of 2 million and operates 64 public health facilities serving 690,000 patients per year. Despite its size, the district is under-resourced in many areas. For example, Wakiso has no dedicated ambulances or budget for emergency vehicles, operating with only part-time use of one pick-up truck.

EMERGENCY AVERTED: GRACE AND HER NEWBORN DAUGHTER

On the second day of the Clinical Support Team program, the systemic challenges in Wakiso became apparent. We were asked if we could transport a mother with obstructed labor to a hospital in downtown Kampala, an hour or more away—which might be too late. When asked why they didn’t perform the C-section right there, the staff responded that the facility was out of sutures!

Because Bulamu’s CST inventory includes essential medicines and supplies, we shared the sutures we had brought and Grace’s C-section was immediately performed onsite. She had a healthy baby girl who is now 7 weeks old. Bulamu’s team has now supported 420 surgeries through the CST program, including 158 C-sections. Shortages of essential medicines and medical supplies are a chronic problem in the Ugandan public health system. We are now researching and sharing data on this problem to support long-term systemic change.
RESTARTING PRIMARY CARE AND BUILDING SYSTEMIC CHANGE

Based on the success of June’s 2-team CST program pilot in Wakiso, we expanded to 4 teams supporting 8 health centers in mid-July. By December, we expect to have placed 18 Clinical Support Teams who will treat and improve care for more than 50,000 patients. Here are a few highlights from the CST program’s first 2 months:

<table>
<thead>
<tr>
<th>Key Performance Indicators (KPIs)</th>
<th>June (2 CSTs)</th>
<th>July (4 CSTs)</th>
<th>Total YTD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients Treated</td>
<td>5,273</td>
<td>13,440</td>
<td>18,713</td>
</tr>
<tr>
<td>Emergency Transports</td>
<td>23</td>
<td>99</td>
<td>122</td>
</tr>
<tr>
<td>Surgeries (incl. C-sections)</td>
<td>153</td>
<td>267</td>
<td>420</td>
</tr>
<tr>
<td>Natural Deliveries</td>
<td>611</td>
<td>1,064</td>
<td>1,675</td>
</tr>
<tr>
<td>Mamma Kits (Delivery supplies)</td>
<td>200</td>
<td>55</td>
<td>255</td>
</tr>
<tr>
<td>Family Planning Visits</td>
<td>693</td>
<td>82,040</td>
<td>2,733</td>
</tr>
<tr>
<td>Ante-Natal Care</td>
<td>3,635</td>
<td>6,482</td>
<td>10,117</td>
</tr>
<tr>
<td>Immunizations</td>
<td>734</td>
<td>4,320</td>
<td>5,054</td>
</tr>
<tr>
<td>HIV Tests</td>
<td>2,915</td>
<td>4,401</td>
<td>7,316</td>
</tr>
<tr>
<td>Infectious Disease Patients</td>
<td>2,243</td>
<td>3,769</td>
<td>6,012</td>
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<tr>
<td>Non-Communicable (NCD) Patients</td>
<td>2,193</td>
<td>5,120</td>
<td>7,313</td>
</tr>
</tbody>
</table>

FEATURED PATIENTS

Godfrey suffered from a hernia for 3 years until he received care from Bulamu’s CST in Wakiso. “I had looked for the surgery fee for 3 years but in vain. Now I am free from hernia and the excruciating pain is gone.”

Agnes with her baby inside the maternity wing of Kasangati Health Center III. Two days earlier, she received a successful C-section from Bulamu’s team after being denied medical care because she had no money. “Bulamu rescued me,” Agnes says.

Lillian holds the notebook that she brought from home, hoping the doctor would make notes in it with her diagnosis and prescriptions. To her surprise, for the first time in her life she received an outpatient form, which the doctor used to record her information. Bulamu has introduced these forms at 12 new health centers within Wakiso District as part of the CST Program.
WE NEED YOUR HELP!

Your generous gift can sponsor one of these elements in the Bulamu Clinical Support Team Program:

- $15,000: A 4-week Bulamu CST of 7 clinicians treating 2,500 patients, including emergency transport that may save lives.
- $7,500: Surgery Intensive that treats 150+ patients, often addressing long standing problems.
- $5,000: A package of diagnostic devices and patient treatment forms for recording patient vital signs and upgrading clinical practices.

Bulamu’s local resources model means that your donation goes directly to pay for medicines, supplies, and the teams of Ugandan doctors and nurses who provide care. We have no fundraisers on staff, and our Board of Directors supports our limited administration costs (14% of expenses in 2019). We appreciate your support for our cost-effective programs that treat the sick and strengthen health systems serving Africans most in need.

Dick Chandler
Board Chair and CEO

Richard Siegler
President

DONATE

contact@bulamuhealthcare.org